

For the first time in our history, anytime, anywhere in America, you can call 988 for immediate help during a mental health crisis.

But to truly meet this moment and carry forward the full potential of 988, we need to do more.

Right now, America's default for people who need immediate help when experiencing a mental health crisis is to call 911, and the default treatment facilities are jails and emergency rooms.

Time and time again, we have seen repeating tragedies of police officers killing individuals during a mental health emergency. The fact is, we need to stop criminalizing mental illness and get people the crisis help that they need.

To truly fulfill the promise of 988, we must make sure anyone who dials 988 will have someone to call, someone to come if they need help, and somewhere to go for compassionate continuous care.

FAILED SOLUTIONS TO RISING ENERGY COSTS

(Mr. SMITH of Missouri asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SMITH of Missouri. Madam Speaker, President Biden's reckless agenda is sending our Nation hurdling towards a recession.

The President wants people to believe 40-year high inflation is someone else's fault. But his solution to this crisis highlights his complicity in driving up the cost of everything, from gas to groceries.

One of President Biden's solutions to rising energy costs is begging foreign countries to pump more oil. This is the same President who is waging a regulatory assault on U.S. energy production. His administration has sold nearly 1 million barrels of oil from the Strategic Petroleum Reserve to a Chinese energy company.

It is unbelievable. I am coauthoring an amendment to block the administration from ever doing this again.

As a fighter for working families, I will keep doing everything I can to hold the administration accountable for driving inflation to the highest level in 40 years.

RIGHT TO CONTRACEPTION ACT

Mr. PALLONE. Mr. Speaker, pursuant to House Resolution 1232, I call up the bill (H.R. 8373) to protect a person's ability to access contraceptives and to engage in contraception, and to protect a health care provider's ability to provide contraceptives, contraception, and information related to contraception, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore (Ms. SÁNCHEZ). Pursuant to House Resolution 1232, the amendment printed in part B of House Report 117-420 is adopted,

and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 8373

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Right to Contraception Act".

SEC. 2. DEFINITIONS.

In this Act:

(1) **CONTRACEPTION.**—The term "contraception" means an action taken to prevent pregnancy, including the use of contraceptives or fertility-awareness based methods, and sterilization procedures.

(2) **CONTRACEPTIVE.**—The term "contraceptive" means any drug, device, or biological product intended for use in the prevention of pregnancy, whether specifically intended to prevent pregnancy or for other health needs, that is legally marketed under the Federal Food, Drug, and Cosmetic Act, such as oral contraceptives, long-acting reversible contraceptives, emergency contraceptives, internal and external condoms, injectables, vaginal barrier methods, transdermal patches, and vaginal rings, or other contraceptives.

(3) **GOVERNMENT.**—The term "government" includes each branch, department, agency, instrumentality, and official of the United States or a State.

(4) **HEALTH CARE PROVIDER.**—The term "health care provider" means, with respect to a State, any entity or individual (including any physician, certified nurse-midwife, nurse, nurse practitioner, physician assistant, and pharmacist) that is licensed or otherwise authorized by the State to provide health care services.

(5) **STATE.**—The term "State" includes each of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, and each territory and possession of the United States, and any subdivision of any of the foregoing, including any unit of local government, such as a county, city, town, village, or other general purpose political subdivision of a State.

SEC. 3. FINDINGS.

Congress finds the following:

(1) The right to contraception is a fundamental right, central to a person's privacy, health, wellbeing, dignity, liberty, equality, and ability to participate in the social and economic life of the Nation.

(2) The Supreme Court has repeatedly recognized the constitutional right to contraception.

(3) In *Griswold v. Connecticut* (381 U.S. 479 (1965)), the Supreme Court first recognized the constitutional right for married people to use contraceptives.

(4) In *Eisenstadt v. Baird* (405 U.S. 438 (1972)), the Supreme Court confirmed the constitutional right of all people to legally access contraceptives regardless of marital status.

(5) In *Carey v. Population Services International* (431 U.S. 678 (1977)), the Supreme Court affirmed the constitutional right to contraceptives for minors.

(6) The right to contraception has been repeatedly recognized internationally as a human right. The United Nations Population Fund has published several reports outlining family planning as a basic human right that advances women's health, economic empowerment, and equality.

(7) Access to contraceptives is internationally recognized by the World Health Organization as advancing other human rights such as the right to life, liberty, expression, health, work, and education.

(8) Contraception is safe, essential health care, and access to contraceptive products and services is central to people's ability to participate equally in economic and social life in the United States and globally. Contraception allows people to make decisions about their families and their lives.

(9) Contraception is key to sexual and reproductive health. Contraception is critical to preventing unintended pregnancy and many contraceptives are highly effective in preventing and treating a wide array of often severe medical conditions and decrease the risk of certain cancers.

(10) Family planning improves health outcomes for women, their families, and their communities and reduces rates of maternal and infant mortality and morbidity.

(11) The United States has a long history of reproductive coercion, including the child-bearing forced upon enslaved women, as well as the forced sterilization of Black women, Puerto Rican women, indigenous women, immigrant women, and disabled women, and reproductive coercion continues to occur.

(12) The right to make personal decisions about contraceptive use is important for all Americans, and is especially critical for historically marginalized groups, including Black, indigenous, and other people of color; immigrants; LGBTQ people; people with disabilities; people with low incomes; and people living in rural and underserved areas. Many people who are part of these marginalized groups already face barriers—exacerbated by social, political, economic, and environmental inequities—to comprehensive health care, including reproductive health care, that reduce their ability to make decisions about their health, families, and lives.

(13) State and Federal policies governing pharmaceutical and insurance policies affect the accessibility of contraceptives, and the settings in which contraception services are delivered.

(14) People engage in interstate commerce to access contraception services.

(15) To provide contraception services, health care providers employ and obtain commercial services from doctors, nurses, and other personnel who engage in interstate commerce and travel across State lines.

(16) Congress has the authority to enact this Act to protect access to contraception pursuant to—

(A) its powers under the Commerce Clause of section 8 of article I of the Constitution of the United States;

(B) its powers under section 5 of the Fourteenth Amendment to the Constitution of the United States to enforce the provisions of section 1 of the Fourteenth Amendment; and

(C) its powers under the necessary and proper clause of section 8 of article I of the Constitution of the United States.

(17) Congress has used its authority in the past to protect and expand access to contraception information, products, and services.

(18) In 1970, Congress established the family planning program under title X of the Public Health Service Act (42 U.S.C. 300 et seq.), the only Federal grant program dedicated to family planning and related services, providing access to information, products, and services for contraception.

(19) In 1972, Congress required the Medicaid program to cover family planning services and supplies, and the Medicaid program currently accounts for 75 percent of Federal funds spent on family planning.

(20) In 2010, Congress enacted the Patient Protection and Affordable Care Act (Public Law 111-148) (referred to in this section as the "ACA"). Among other provisions, the ACA included provisions to expand the affordability and accessibility of contraception

by requiring health insurance plans to provide coverage for preventive services with no patient cost-sharing.

(21) Despite the clearly established constitutional right to contraception, access to contraceptives, including emergency contraceptives and long-acting reversible contraceptives, has been obstructed across the United States in various ways by Federal and State governments.

(22) As of 2022, at least 4 States tried to ban access to some or all contraceptives by restricting access to public funding for these products and services. Furthermore, Arkansas, Mississippi, Missouri, and Texas have infringed on people's ability to access their contraceptive care by violating the free choice of provider requirement under the Medicaid program.

(23) Providers' refusals to offer contraceptives and information related to contraception based on their own personal beliefs impede patients from obtaining their preferred method, with laws in 12 States as of the date of introduction of this Act specifically allowing health care providers to refuse to provide services related to contraception.

(24) States have attempted to define abortion expansively so as to include contraceptives in State bans on abortion and have also restricted access to emergency contraception.

(25) In June 2022, Justice Thomas, in his concurring opinion in *Dobbs v. Jackson Women's Health Organization* (597 U.S. ____ (2022)), stated that the Supreme Court "should reconsider all of this Court's substantive due process precedents, including *Griswold*, *Lawrence*, and *Obergefell*" and that the Court has "a duty to correct the error established in those precedents" by overruling them.

(26) In order to further public health and to combat efforts to restrict access to reproductive health care, congressional action is necessary to protect access to contraceptives, contraception, and information related to contraception for everyone, regardless of actual or perceived race, ethnicity, sex (including gender identity and sexual orientation), income, disability, national origin, immigration status, or geography.

SEC. 4. PERMITTED SERVICES.

(a) GENERAL RULE.—A person has a statutory right under this Act to obtain contraceptives and to engage in contraception, and a health care provider has a corresponding right to provide contraceptives, contraception, and information related to contraception.

(b) LIMITATIONS OR REQUIREMENTS.—The statutory rights specified in subsection (a) shall not be limited or otherwise infringed through any limitation or requirement that—

(1) expressly, effectively, implicitly, or as implemented singles out the provision of contraceptives, contraception, or contraception-related information; health care providers who provide contraceptives, contraception, or contraception-related information; or facilities in which contraceptives, contraception, or contraception-related information is provided; and

(2) impedes access to contraceptives, contraception, or contraception-related information.

(c) EXCEPTION.—To defend against a claim that a limitation or requirement violates a health care provider's or patient's statutory rights under subsection (b), a party must establish, by clear and convincing evidence, that—

(1) the limitation or requirement significantly advances access to contraceptives, contraception, and information related to contraception; and

(2) access to contraceptives, contraception, and information related to contraception or the health of patients cannot be advanced by a less restrictive alternative measure or action.

SEC. 5. APPLICABILITY AND PREEMPTION.

(a) IN GENERAL.—

(1) GENERAL APPLICATION.—Except as stated under subsection (b), this Act supersedes and applies to the law of the Federal Government and each State government, and the implementation of such law, whether statutory, common law, or otherwise, and whether adopted before or after the date of enactment of this Act, and neither the Federal Government nor any State government shall administer, implement, or enforce any law, rule, regulation, standard, or other provision having the force and effect of law that conflicts with any provision of this Act, notwithstanding any other provision of Federal law, including the Religious Freedom Restoration Act of 1993 (42 U.S.C. 2000bb et seq.).

(2) SUBSEQUENTLY ENACTED FEDERAL LEGISLATION.—Federal statutory law adopted after the date of the enactment of this Act is subject to this Act unless such law explicitly excludes such application by reference to this Act.

(b) LIMITATIONS.—The provisions of this Act shall not supersede or otherwise affect any provision of Federal law relating to coverage under (and shall not be construed as requiring the provision of specific benefits under) group health plans or group or individual health insurance coverage or coverage under a Federal health care program (as defined in section 1128B(f) of the Social Security Act (42 U.S.C. 1320a-7b(f))), including coverage provided under section 1905(a)(4)(C) of the Social Security Act (42 U.S.C. 1396d(a)(4)(C)) and section 2713 of Public Health Service Act (42 U.S.C. 300gg-13).

(c) DEFENSE.—In any cause of action against an individual or entity who is subject to a limitation or requirement that violates this Act, in addition to the remedies specified in section 7, this Act shall also apply to, and may be raised as a defense by, such an individual or entity.

(d) EFFECTIVE DATE.—This Act shall take effect immediately upon the date of enactment of this Act.

SEC. 6. RULES OF CONSTRUCTION.

(a) IN GENERAL.—In interpreting the provisions of this Act, a court shall liberally construe such provisions to effectuate the purposes of the Act.

(b) RULES OF CONSTRUCTION.—Nothing in this Act shall be construed—

(1) to authorize any government to interfere with a health care provider's ability to provide contraceptives or information related to contraception or a patient's ability to obtain contraceptives or to engage in contraception; or

(2) to permit or sanction the conduct of any sterilization procedure without the patient's voluntary and informed consent.

(c) OTHER INDIVIDUALS CONSIDERED AS GOVERNMENT OFFICIALS.—Any person who, by operation of a provision of Federal or State law, is permitted to implement or enforce a limitation or requirement that violates section 4 shall be considered a government official for purposes of this Act.

SEC. 7. ENFORCEMENT.

(a) ATTORNEY GENERAL.—The Attorney General may commence a civil action on behalf of the United States against any State that violates, or against any government official (including a person described in section 6(c)) that implements or enforces a limitation or requirement that violates, section 4. The court shall hold unlawful and set aside the limitation or requirement if it is in violation of this Act.

(b) PRIVATE RIGHT OF ACTION.—

(1) IN GENERAL.—Any individual or entity, including any health care provider or patient, adversely affected by an alleged violation of this Act, may commence a civil action against any State that violates, or against any government official (including a person described in section 6(c)) that implements or enforces a limitation or requirement that violates, section 4. The court shall hold unlawful and set aside the limitation or requirement if it is in violation of this Act.

(2) HEALTH CARE PROVIDER.—A health care provider may commence an action for relief on its own behalf, on behalf of the provider's staff, and on behalf of the provider's patients who are or may be adversely affected by an alleged violation of this Act.

(c) EQUITABLE RELIEF.—In any action under this section, the court may award appropriate equitable relief, including temporary, preliminary, or permanent injunctive relief.

(d) COSTS.—In any action under this section, the court shall award costs of litigation, as well as reasonable attorney's fees, to any prevailing plaintiff. A plaintiff shall not be liable to a defendant for costs or attorney's fees in any non-frivolous action under this section.

(e) JURISDICTION.—The district courts of the United States shall have jurisdiction over proceedings under this Act and shall exercise the same without regard to whether the party aggrieved shall have exhausted any administrative or other remedies that may be provided for by law.

(f) ABROGATION OF STATE IMMUNITY.—Neither a State that enforces or maintains, nor a government official (including a person described in section 6(c)) who is permitted to implement or enforce any limitation or requirement that violates section 4 shall be immune under the Tenth Amendment to the Constitution of the United States, the Eleventh Amendment to the Constitution of the United States, or any other source of law, from an action in a Federal or State court of competent jurisdiction challenging that limitation or requirement.

SEC. 8. SEVERABILITY.

If any provision of this Act, or the application of such provision to any person, entity, government, or circumstance, is held to be unconstitutional, the remainder of this Act, or the application of such provision to all other persons, entities, governments, or circumstances, shall not be affected thereby.

The SPEAKER pro tempore. The bill, as amended, is debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce or their respective designees.

The gentleman from New Jersey (Mr. PALLONE) and the gentlewoman from Washington (Mrs. RODGERS) each will control 30 minutes.

The Chair recognizes the gentleman from New Jersey (Mr. PALLONE).

GENERAL LEAVE

Mr. PALLONE. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and add extraneous material on H.R. 8373, the Right to Contraception Act.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

Mr. PALLONE. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in strong support of H.R. 8373, the Right to Contraception Act introduced by Representative MANNING.

When the Supreme Court overruled a woman's constitutional right to abortion last month, it also called into question all the other fundamental freedoms that Americans cherish under the 14th Amendment's right to privacy, including the right to contraception.

In his concurrence, Justice Clarence Thomas went so far to even contend that the Court should reconsider *Griswold*, the landmark case that first recognized the constitutional right to use contraceptives.

This has opened the door for Republican legislators in States like Idaho, Louisiana, and Mississippi to try to ban certain contraceptive methods. These extreme proposals build on decades of Republican efforts to restrict access to essential reproductive healthcare services. They have tried to gut the Title X Family Planning program, which provides access to contraceptives and family planning services for low-income and uninsured individuals. They have also repeatedly tried to invalidate the Affordable Care Act's contraceptive mandate, which ensures coverage for contraception free of charge.

Contraception is basic preventive healthcare and is crucial to the health and human rights of all people. Millions of people rely on contraception not only to prevent unintended pregnancies but to prevent and treat a wide range of medical conditions. Access to contraception is essential to achieving gender equality as it advances women's health and economic empowerment.

H.R. 8373 ensures that Republicans cannot limit people's access to contraceptives. It also ensures that healthcare providers can provide contraceptives and information about them free from political interference.

Madam Speaker, while the right to contraception is legal today, we must act to ensure this remains true in the future. This legislation does exactly that, by enshrining the right to contraception in Federal law.

Madam Speaker, I urge my colleagues to support this legislation, and I reserve the balance of my time.

Mrs. RODGERS of Washington. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in opposition to H.R. 8373. Every woman's potential journey to motherhood is different, and I support their access to contraception.

However, this legislation has a lot of problems. Democrats just introduced it on Friday and debated it for the first time on Monday in the Committee on Rules. And since then, they have had to introduce multiple amendments to address their own failures to draft good policy.

This is not how we build trust in solutions to bring forward in the people's House. If Democrats came to me and asked to work together on a bill, I

would have been happy to roll up my sleeves and work with them.

For years, Republicans on both sides of the Capitol have led on solutions to allow for great access to safe and effective contraception, including making it available over the counter. Right now, Congresswoman ASHLEY HINSON and Congresswoman STEPHANIE BICE are leading on these bills.

Unfortunately, today, rather than work with us, Democrats again, are spreading fear and misinformation to score political points. And they are doing it with a very poorly drafted bill that opens the door further to extreme abortion on demand and their agenda.

H.R. 8373 is a Trojan horse for more abortions. It should be called the payouts for Planned Parenthood act. It would send more taxpayer dollars to Planned Parenthood, freeing up more funds for them to provide abortions and end vulnerable lives.

This bill endangers the health and safety of women. It allows Planned Parenthood and abortion providers to prescribe both on- and off-label drugs to be used for abortions without any restrictions. Additionally—and again, despite many drafts—Democrats included a definition of contraception that is not limited to FDA-approved products.

The term “contraception” is defined as an action taken to prevent pregnancy, including the use of contraceptives or fertility awareness-based methods and sterilization procedures.

This means that the bill creates an individual right to engage in contraception which can include the use of FDA-approved products, but also any other action taken to prevent pregnancy, including non-approved products.

H.R. 8373 will also continue President Biden's war on religious liberty and conscience protections. It would force health providers to violate their religion and sincerely held beliefs to provide contraception and perform sterilizations, including on minors.

It would also force organizations, like the Little Sisters of the Poor to violate their religion and provide contraception. For all the fearmongering Democrats are spreading about other Supreme Court precedents being threatened, where is the respect for the Little Sisters of the Poor and their victory for their constitutionally guaranteed religious freedom?

The unfortunate reality today is that this bill goes too far and defies the most basic safeguards meant to protect women and children. Women deserve the truth, not more fear and misinformation that forces an extreme agenda on the American people.

Again, Republicans have led to make birth control available over the counter. In 2019, the Federal Government, under a Republican President, spent \$1.8 billion for family planning. We have solutions to build on this work to support women.

Unfortunately, Democrats are conflating the issues of abortion and

contraception to promote unrestricted abortion for all 9 months of pregnancy.

Contraception is fundamentally different than abortion; a distinction recognized by the pro-life community, doctors, medical professionals, the science, and in Justice Alito's *Dobbs* opinion.

Abortion intentionally ends a human life. Contraception is to prevent conception.

There is a clear distinction, and to suggest otherwise is more fearmongering and scare tactics that are a disservice to women everywhere.

Madam Speaker, I urge opposition to H.R. 8373, and I urge my colleagues across the aisle to work with us. We welcome the opportunity. Rather than rushing another poorly drafted bill—an extreme bill—through the people's House, we can come together to support every woman's path to a better life and every woman's journey to motherhood.

Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 2½ minutes to the gentlewoman from North Carolina (Ms. MANNING), the sponsor of this legislation.

Ms. MANNING. Madam Speaker, I thank the chairman for yielding.

Madam Speaker, I rise in support of my bill, the Right to Contraception Act. It seems unbelievable that in the year 2022, we should have to explain that access to birth control is about equality. It is critically important so that women can:

Decide whether and when to have a family.

Pursue an education.

Build an economically secure future; and

Protect their health.

Let's be honest about the facts. Almost all women will use birth control at some point in their lives, and more than 96 percent of voters support access to birth control. Yet, the right to birth control is under attack by Republican lawmakers who are pushing disinformation about how contraceptives work and attempting to ban methods like IUDs and Plan B.

Justice Thomas has added fuel to that fire by stating in *Dobbs* that the Court should reconsider the constitutional right to contraception.

This extremism is about one thing: control of women. We will not let this happen. We will not play defense anymore. This time, we are playing offense.

My bill creates a Federal statutory right for individuals to use birth control and for healthcare professionals to provide it.

□ 0930

It protects a full range of contraceptive methods, including birth control pills, IUDs, and emergency contraceptives.

It subjects any State or government official who restricts access to contraceptive services to a civil action by the

attorney general, or an individual or healthcare provider whose rights are violated.

Let's be clear, this bill is about allowing women the freedom to choose the contraception that works best for them to allow them to prevent unintended pregnancies.

American women—indeed all Americans—deserve the freedom to make their own decisions about their bodies, their family planning, and their lives.

Madam Speaker, I urge my colleagues on both sides of the aisle to vote “yes” on this well-crafted bill, the Right to Contraception Act, because women and girls across this country are watching you. They want to know: Are you willing to stand up for them? Are you willing to fight for them?

Madam Speaker, I certainly am.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. ESHOO), the chairwoman of the Energy and Commerce Health Subcommittee.

Ms. ESHOO. Madam Speaker, I rise in the strongest support of H.R. 8373, the Right to Contraception Act.

We all belong to committees here, and when we do, as we do, we get to know Members very well. An observation of mine over these years as a member of the Energy and Commerce Committee is—I don't know any Member that has 10, 12, or 14 children. I would say there is some family planning going on here.

This is a private decision that we all have had the freedom to make. This bill is about family planning. It is about birth control. It is not about controlling women. It is about the freedom that women can make.

No politician or judge should be interfering in private healthcare decisions or restrict access to contraception. The Supreme Court has threatened this fundamental right, leaving this issue on the Court's chopping block.

Madam Speaker, everyone should vote for this bill.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from Florida (Mrs. CAMMACK).

Mrs. CAMMACK. Madam Speaker, I rise today in opposition to H.R. 8373, the right to deception act.

First, this bill is completely unnecessary. In no way, shape, or form is access to contraception limited or at risk of being limited. The liberal majority is clearly trying to stoke fears and mislead the American people, once again, because in their minds stoking fear is clearly the only way that they can win.

No State—not one—not one State across the country has banned access to contraceptives. That is a fact—and an inconvenient one on the left. Now they are left to make up wild stories about States that they cannot name banning contraceptives.

However, rather than uniting behind the broad and commonsense notion that access to safe and legal contraception is important, my colleagues on the left have once again chosen political theater. I guess that would explain the connection to Hollywood, right?

It is time to get past the theater and look at these inconvenient facts that my colleagues on the left will not tell you about, and their outrageous claims.

They claim that this is a clean codification to ensure that contraceptives can never be banned in this country. Let me be clear, this goes far beyond that claim.

In fact, this bill jeopardizes constitutional rights of individuals and organizations across this great land by forcing providers to prescribe various forms of contraception that violates their religious rights. We are a Nation that upholds and values religious freedom, and this bill here today flies in the face of individuals with religious liberty concerns.

As a constitutional conservative, I am also disturbed by the provisions within this bill that attempt to provide a back door for abortion service providers, like Planned Parenthood, to tap into more Federal taxpayer dollars.

This bill, brought under false pretenses by the left, in a vain attempt to scare Americans with lies and exaggeration represents a clear overstep of Federal authority.

If you are still wondering why every single Member in this Chamber should be voting against this bill—the right to deception act—you should know that this administration has already proven that they will sick a highly politicized DOJ on concerned parents.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mrs. RODGERS of Washington. Madam Speaker, I yield the gentlewoman from Florida an additional 1 minute.

Mrs. CAMMACK. Madam Speaker, if you are wondering, once again, why every single Member in this Chamber who took an oath to uphold the United States Constitution, not a political parties' oath, if you are wondering why you should vote against the right to deception act, you should know that this administration has already proven that they will sick a highly politicized DOJ on concerned parents. They have done it before. They will do it again.

This bill here today would take away a parent's rights with regard to their children and the State laws that are designed to protect minors. No bureaucrat in Washington knows better than our parents back home. I would be happy to debate that fact any day.

Let's recap. This bill—the right to deception act—is looking to solve a problem that doesn't exist. But more than that, in seeking to solve a problem that doesn't exist, you want to spend more of our taxpayer money to grow the size and scope of government and to allow more abortions to occur

and kill our children. Cool. You all are a real piece of work. Folks back home, they see right through this, and they will see through it in November.

Madam Speaker, I urge opposition to this bill.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Illinois (Ms. SCHAKOWSKY), the chairwoman of the Consumer Protection and Commerce Subcommittee.

Ms. SCHAKOWSKY. Madam Speaker, I thank the sponsors of this legislation for their support. I have been proud to join them.

Madam Speaker, you know, you would think that everyone would want to protect access to contraception and to family planning, especially people who are opposed to abortion. Yet, we have seen that there have been efforts to exclude available and effective contraception, that there has been an effort to limit the choices that women have to even have contraception. So, yes, we absolutely need to pass this bill. We need to pass it into law. We need to do it right now.

Madam Speaker, 99 percent of Americans are in favor of contraception, so let's pass this legislation. We should do it with all our Members on both sides of the aisle.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. MATSUI), a member of our committee.

Ms. MATSUI. Madam Speaker, I rise today in support of H.R. 8373, the Right to Contraception Act.

Contraception is empowering. It gives people control over what happens to their bodies and supports the freedom to plan a family. Using birth control can shape an individual's life. Being able to choose the contraceptive that is right for you impacts your future health, education, employment, and economic security.

The Supreme Court's decision was a direct attack on abortion, and Americans are now justifiably scared about the future of birth control. Republicans across this country will continue their extreme assault on basic freedoms. Justice Thomas made it clear that the Supreme Court will do nothing to protect our fundamental rights from these coordinated attacks.

I refuse to sit back and watch as Republicans regress our Nation to a place where my granddaughter has fewer rights than her mother or I did.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mr. PALLONE. Madam Speaker, I yield an additional 30 seconds to the gentlewoman from California.

Ms. MATSUI. Madam Speaker, I refuse to sit back and watch where States can take away an individual's ability to make personal decisions about their body, their life, and their future.

Madam Speaker, I implore you to really think about this and pass this bill.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from Arizona (Mrs. LESKO), a member of the Energy and Commerce Committee.

Mrs. LESKO. Madam Speaker, I rise in opposition to H.R. 8373.

I am here today with my Republican colleagues to stand up for the health and safety of women and girls across our Nation.

It is unfortunate that this bill is written in such a way that it is unclear that it just covers traditional contraceptives. It is disappointing to see that my colleagues across the aisle are continuing to push their extreme abortion on demand agenda.

It is unclear why those who call themselves the “party of women” insist on prioritizing the billion-dollar, far-left abortion lobby over women and girls.

This legislation—the payouts for Planned Parenthood act—permits the widespread use of chemical abortion pills. The FDA deems these drugs as high-risk because they can cause excessive bleeding, intense pain, infections, and even death.

To make matters even worse, this bill allows abortion providers to administer non-FDA approved drugs and devices to women and girls without any regard for the drug’s efficacy or the safety of the patient.

We should not be promoting the widespread and unsupervised use of high-risk or unapproved drugs that could endanger women and girls’ lives, and almost certainly will end the lives of their babies.

This legislation also erodes decades of bipartisan agreement that taxpayer dollars should not be used to fund abortions. Instead, the payouts for Planned Parenthood act forces States to direct more Federal funding to Planned Parenthood and other abortion providers.

This legislation is not about protecting access to contraception. It is not about protecting the rights of women and girls. It is about one thing, and one thing only, lining the pockets of Planned Parenthood and the rest of the abortion lobby.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Florida (Ms. CASTOR), who is a member of our committee and chairs the Select Committee on the Climate Crisis.

Ms. CASTOR of Florida. Madam Speaker, we are at a perilous time where an extremist Supreme Court and the GOP are rolling back our rights. They are rolling back the legal guarantee to control our bodies and to make our own decisions about when to have children.

In States like mine in Florida, the Governor has already instituted a cruel 15-week abortion ban, and recently struck a plan to provide contraceptive care to working-class women and girls for the second year in a row.

I have served in Congress for enough years to watch the GOP over time fight

to eliminate birth control and family planning funds. They fought to eliminate the no-cost birth control under the Affordable Care Act, in addition to the Democrats fighting to establish this right to contraceptives.

This bill also would ensure that doctors can continue to do their jobs and provide contraceptives without being turned into criminals. Contraceptive use is crucial to preventing unintended pregnancies, preventing and treating countless medical conditions, and decreasing the risk of certain cancers.

Everyone should have equal access to necessary preventative care no matter which State you live in. On behalf of the women in the State of Florida and America, I urge my colleagues to support the right to contraceptives and the right of women to control their own bodies.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from New Hampshire (Ms. KUSTER), a member of the Energy and Commerce Committee.

Ms. KUSTER. Madam Speaker, I rise in support of the Right to Contraception Act.

The overturning of *Roe v. Wade* by the Supreme Court was a wake-up call. We cannot leave our right to privacy and our most fundamental freedoms up to chance.

The government has no place inserting itself into the personal and private healthcare decisions of Americans, including access to contraceptives.

Ongoing extreme attacks on women’s freedom and control of our own bodies make clear that Congress must take action to protect our most basic right to medical care and contraception. There are countless reasons for patients to access contraception and why healthcare providers prescribe. These reasons are nuanced, complicated, and, frankly, none of the government’s business.

Madam Speaker, I urge my colleagues to vote “yes” and to protect the privacy and freedom of millions of Americans.

□ 0945

Mrs. RODGERS of Washington. Madam Speaker, I yield 3 minutes to the gentleman from Texas (Mr. BURGESS), who is a leader on the Energy and Commerce Committee.

Mr. BURGESS. Madam Speaker, I thank the gentlewoman from Washington for yielding.

While practicing medicine for over 30 years back in Texas, I personally prescribed a lot of contraceptives. I have seen the benefit that they have over the lives of women who use them, and I will continue to support a woman’s right to access contraception.

But this bill was brought to the floor of the House urgently and outside of regular order. There was no attempt to work with Republicans. The majority

hastily put forward an incomplete product that, at the end of the day, is never going to see the light of day in the Senate.

The Right to Contraception Act would establish a statutory right for patients to obtain contraception and for doctors to prescribe. The kindest thing I can say about this legislation is that it is duplicative and unnecessary. But, unfortunately, it can also be damaging.

Contraception is so broadly defined that it could guarantee access to medical abortion pills or even contraceptives that might not have FDA approval. It could lead to the dispensing of unsafe products. Even if a product gets FDA approval, it does not always ensure its safety.

Essure was a medical device previously sold to cause sterilization. The FDA approved this device in 2002, but it didn’t start examining reported concerns by users until 2015. In 2018, the FDA restricted the sale of Essure, and the manufacturer took the device completely off the market.

The Dalkon Shield is an intrauterine birth control device manufactured and sold in the early 1970s. This device was responsible for many reported incidents of inflammatory infections, uterine perforations, spontaneous septic abortions, as well as at least four deaths. The FDA requested this device be taken off the market in October of 1974 but never issued a formal recall. Under the language of this bill considered today, a provider could provide that. When manufacturing ceased in 1976, more than 2 million of these devices had already been sold in the United States.

Madam Speaker, I am the first to agree that the drug approval process at the FDA should be made faster, more transparent, and safer. But imagine the dangers of allowing contraceptives and devices where the FDA has not even considered their safety.

Madam Speaker, you will find consensus in the Energy and Commerce Committee amongst Republicans regarding preserving access to contraception if the Democrats had only decided to work. We had no legislative hearing; we had no subcommittee markup; and we had no full committee markup.

The bill was introduced last Friday and brought to the Rules Committee on Monday. I am also a member of the Rules Committee, so that was the only hearing that we had on this legislation. As I like to tell people, Rules Committee members are like the apex predators of the legislative process. We are only there at the end of the road.

Madam Speaker, this bill is bad, and I urge it not to be adopted.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentlewoman from Minnesota (Ms. CRAIG), who is the co-lead on this legislation.

Ms. CRAIG. Madam Speaker, to tell you the truth, I am disappointed to be here today, too, supporting the very idea and the very notion that we have

to be here today exerting and codifying the right for women to make their own healthcare and family planning decisions.

It is 2022, and we are standing here today with Roe overturned and with 77 percent of this extreme GOP caucus voting against marriage equality, so you had better bet, Madam Speaker, that we are here because the Supreme Court has attacked reproductive rights. It is absolutely necessary that we take action today.

For most of our lives, women across our country, including most in this room, have relied on birth control to exert control over their own futures. Yet, today, in the year 2022, many of those women are wondering if they will see that control disappear.

Make no mistake about it, Madam Speaker, this is actually about control. An extreme GOP and extreme Supreme Court want to take away your freedom and your control over your own lives.

Quite frankly, it is tragic. My colleague is right. The idea that we are even standing here today having to consider legislation that would codify Americans' right to contraception, birth control, and IUDs—and I can't believe the gentlewoman mentioned Trojan in her opening remarks. We are here because we are in an absurd time where an extremist GOP wants to take control.

Madam Speaker, I urge a "yes" vote on this legislation today.

Mrs. RODGERS of Washington. Madam Speaker, I yield 5 minutes to the gentlewoman from Iowa (Mrs. MILLER-MEEKS).

Mrs. MILLER-MEEKS. Madam Speaker, I rise today in support of the Allowing Greater Access to Safe and Effective Contraception Act and against H.R. 8373. My colleague, Dr. MICHAEL BURGESS, has listed its many flaws, and this is an extreme bill from a desperate majority.

I was proud to join my colleague, Representative HINSON from Iowa, in introducing this bill, and I urge my colleagues to vote "yes" on the motion to recommit so we can bring this bill to the floor. This bill would make FDA-approved oral contraceptives available for over-the-counter use.

In 2019, I championed similar legislation as a member of the Iowa State Senate that would allow women over the age of 18 to access over-the-counter oral contraceptives.

As a physician, a former director of the Iowa Department of Public Health, and a mother, I understand how important it is for women to have increased access to oral contraceptives. The Iowa Senate knew it, too, which is why our State senate passed that bill with overwhelmingly bipartisan support, and it would have passed with only Republican support.

Madam Speaker, I urge my colleagues to vote against H.R. 8373 and for the motion to recommit.

Madam Speaker, over the past month, the issue of abortion has been a

prevalent topic in the news in light of the Supreme Court's Dobbs decision. I am pro-life. Most of my colleagues on the other side of the aisle are not. But regardless of our stance, we can all agree that we should enact policies to reduce the number of women who feel the need to seek an abortion.

The evidence is clear. One of the best ways we can prevent abortions is to increase access to contraception. Research has shown us time and time again that if you make it easier for women to access oral contraceptives, you lower the rate of unplanned pregnancies.

Providing over-the-counter contraceptives is safe and effective for women. Oral contraceptives were first approved by the Food and Drug Administration in 1960 and have been on the market since. But H.R. 8373 would allow non-FDA-approved drugs and devices.

The ones that have been approved are safe and pose fewer health risks than some drugs that are already being sold over the counter. Oral contraceptives are one of the most popular methods for preventing conception and avoiding pregnancy.

In addition, women use birth control pills or oral contraceptives for a variety of other reasons. They can use them for regulating menstruation, to prevent anemia, to prevent painful heavy periods, and to address acne.

Making oral contraceptives available over the counter will also provide benefits to populations that have historically faced challenges in accessing healthcare, such as low-income, rural, and young women. The NIH conducted a study that compared women receiving oral contraceptives through a prescription to women who were able to get oral contraceptives over the counter. The results of this study indicated that women were more likely to continue taking oral contraceptives if they are able to buy them over the counter.

We can also ensure that young women have timely and more affordable access to care, but we do not want women to circumvent getting their preventative healthcare. We can ensure that young women who are statistically less likely to seek regular care at a primary care provider OB/GYN have access to oral contraceptives, and we can ensure that low-income women who may face financial challenges in taking time off their job to attend a doctor's appointment still have access to oral contraceptives.

I want to be clear that this bill is not an effort to circumvent the need for women to seek regular, preventative care. If oral contraceptives are approved for over-the-counter use, then women should continue to meet with their primary care provider, and they should continue to see their OB/GYN. It is imperative that women are fully apprised of any potential side effects of contraceptives and advised if they are at increased risk of potential side ef-

fects, but that is not what H.R. 8373 does. It does not protect women's health.

In my experience as a doctor in caring for women, we are knowledgeable; we are capable; and we are not going to avoid going to a doctor merely because we can get drugs or medicine without having seen that provider for a prescription. So, I trust the intelligence and capabilities of women to make informed decisions about their own care.

Let me be clear. Our oral contraception bill is pro-family, pro-women, and pro-life. H.R. 8373 is not.

Madam Speaker, I urge my colleagues to do the right thing. Vote "yes" on the motion to recommit and against H.R. 8373, and let's bring this commonsense bill to the floor.

Mr. PALLONE. Madam Speaker, in response to the previous speaker, this bill defines contraceptives as those legally marketed under the Federal Food, Drug, and Cosmetic Act. Nothing prevents the FDA from removing unsafe products from the market.

Madam Speaker, I yield 1 minute to the gentlewoman from Washington (Ms. SCHRIER). Dr. KIM SCHRIER is a member of our committee.

Ms. SCHRIER. Madam Speaker, I thank my colleague, Representative MANNING, for introducing this very straightforward bill.

This bill affirms current law to ensure that women can determine the course of their lives and decide if, when, and under what circumstances to have a child. This is a fundamental right.

Despite broad public support for birth control, we have already seen States use the Dobbs decision as an opening to try to block or ban certain methods of contraception. These actions bring a new sense of urgency to make sure no one can take away this very important tool from women.

As a pediatrician, I have had the privilege of helping young women decide which method of contraception would be best for them, and not one of them wanted to become pregnant any time soon. Everybody should be able to choose the contraceptive that meets their needs without interference from politicians.

This is not a controversial bill. It affirms our right to use contraception and for doctors to prescribe contraception. Frankly, it should get unanimous support in the Chamber.

Madam Speaker, I urge my colleagues to vote "yes."

Mrs. RODGERS of Washington. Madam Speaker, to clarify, the bill defines both contraceptive and contraception. Contraceptive is FDA approved; contraception is not limited to FDA-approved licensed products.

Madam Speaker, I yield 1 minute to the gentleman from Indiana (Mr. BUCSHON). Dr. LARRY BUCSHON is a leader on the Energy and Commerce Committee.

Mr. BUCSHON. Madam Speaker, I rise today in opposition to H.R. 8373.

The bill isn't about access to traditional contraception. It is about preserving access to abortion drugs.

As a physician, I adamantly believe that treatment decisions should be made by a patient and their provider. In making that decision, they need to be fully informed, knowing what we are using, for what purpose, and whether the FDA has determined it is, number one, safe; and, number two, unless the drug falls under right-to-try laws, fully proven to be effective.

The legislation defines a contraceptive as any device or medication used to prevent pregnancy, whether specifically used to prevent pregnancy or for other health needs. There is no explanation of what the device or medication might be, and no definition for other health needs.

The bill is dangerously vague. It could be applied to chemical abortion drugs to end a pregnancy in addition to traditional contraceptives. It could be used to provide statutory access to drugs without the guidance and administration of a trained healthcare professional or without any FDA review.

Madam Speaker, I urge my colleagues to oppose this ill-crafted bill.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Texas (Mrs. FLETCHER), who is a member of our committee.

Mrs. FLETCHER. Madam Speaker, I rise in support of the Right to Contraception Act as an original cosponsor. I thank Representative MANNING for her leadership—and her co-leads, Representatives CRAIG, JACOBS, and WILLIAMS—on this important bill, which responds to the very real threats to access to reproductive healthcare and to bodily autonomy that we face today.

We saw this threat in Justice Thomas' concurring opinion in the *Dobbs* case, suggesting the landmark case of *Griswold v. Connecticut*, which gave married couples the right to use birth control, should be revisited and overturned. We see these threats from some in this body and legislatures across the country. We certainly see it in Texas.

We also see that this effort does not represent the desires of the vast majority of people I represent who rely on contraception of all kinds every single day and have for more than 50 years. Yet, we see these efforts to block women from accessing contraception that works for them, including IUDs.

Once again, I am proud to protect the health, privacy, dignity, and autonomy of women and families across this country by voting "yes" on this bill, and I urge my colleagues to do the same.

□ 1000

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentleman from Maryland (Mr. HOYER), our majority leader.

Mr. HOYER. Madam Speaker, I thank the gentleman for yielding.

I have three daughters. They are all adults. They are all amazed that we are here debating this issue. The ranking member said, me too; obviously, for different reasons.

In 1965, the Supreme Court—long before any of the present Justices had these theories about what due process is and is not—said that women had a constitutional right and, in addition, men, to seek services related to family planning.

Madam Speaker, women's rights are under assault in America. From the very beginning, of course, women were second-class citizens until we radically, in the beginning of the last century, decided, oh, well, women are part of America and we are going to let them vote. And successively, we have taken steps to treat women equally.

The Supreme Court's extremist *Dobbs v. Jackson* decision overturned 49 years of legal precedent and erased decades of progress toward women's equality. This bill deals with 57 years of constitutional law, since 1965, when *Griswold* was decided 7-2. It was not a controversial opinion with the American people nor, frankly, is this bill controversial, of whatever faith you may be.

Not only did Republican-appointed Justices strip women of their constitutional right to access safe, legal abortions, they also opened the door for lawmakers to restrict women's ability to make reproductive healthcare decisions.

Justice Thomas, of course, as all of us know, issued a radical concurring opinion that called for a reconsideration of landmark legal precedents, one of which we are dealing with today, *Griswold v. Connecticut*, as I said, decided in 1965, which established Americans' constitutional right to contraception.

Birth control allows women and their partners to make essential decisions about their health and their lives, including whether to have children and start a family. That is the consensus in America, overwhelmingly.

Nevertheless, the Supreme Court has put all forms of contraception in jeopardy with this decision. Now, some say, No, it doesn't. But Justice Thomas points out that the rationale of *Dobbs* is equally applicable from his perspective and, in my opinion, from his perspective, he is probably right, for himself and for radical members of the Court.

Restricting contraceptives means undermining women's health, personal privacy, and bodily autonomy. Now, there are many authoritarian regimes in the world that don't take any consideration into the rights we have over our own bodies.

Madam Speaker, we need to do everything we can here in Congress to ensure that all Americans have access to safe, reliable contraceptive care. That is why I am pleased to bring this bill to the floor.

And I thank KATHY MANNING for her leadership on the Right to Contracep-

tion Act. I also want to thank Representatives WILLIAMS, JACOBS, and CRAIG, as well as LIZZIE FLETCHER, who just spoke, for their leadership on this bill. I am grateful to them for standing up on this issue, as well as to Chairman PALLONE, for moving quickly to advance this bill through the Energy and Commerce Committee.

This legislation will enshrine the constitutional rights established by *Griswold v. Connecticut* and *Eisenstadt v. Baird* in Federal statute, ensuring that Americans can access contraceptive care legally wherever they live.

As I said at the beginning, my three daughters are amazed that this legislation is on the floor; amazed that there would be a premise that somehow the Constitution did not guarantee to my three daughters the right to make these decisions and not all of us.

This is about freedom. This is about individual integrity. And this vote will show the American people where Members stand on this question of whether it should continue to be legal for people in this country to pursue family planning as they perceive they want to do.

So let's vote "yes" to promote women's health. Let's vote "yes" to prevent further restrictions on women's basic rights to privacy and autonomy.

Let's vote "yes" for freedom. There is a lot of talk about freedom, right up until the time one decides to restrict that freedom, and then it is okay.

I urge all my colleagues to vote "yes" to protect the Constitution, the constitutional precedents, and freedom.

Mrs. RODGERS of Washington. Madam Speaker, I would like to clarify, this legislation never went through the Energy and Commerce Committee. The only debate was in the Rules Committee.

And I also stand here proud that, in 2020, on the 100th anniversary of women gaining the right to vote, led by pro-life Republican women who fought for decades, we have a record number of women serving in the House of Representatives, a record number of Republican women.

Madam Speaker, I yield 2 minutes to gentlewoman from Texas (Ms. VAN DUYNE), a Member from the class of 2020.

Ms. VAN DUYNE. Madam Speaker, I rise today to adamantly oppose H.R. 8373, the payouts for Planned Parenthood act, a poorly drafted and loosely defined bill that would be detrimental to women's health and send taxpayer dollars straight to abortion-on-demand beneficiaries.

This bill is not about contraceptives which would prevent a pregnancy. This bill is about funding unlimited access to abortion pills.

A woman's decision to get contraceptive pills should be an informed decision between her and her doctor, and not a pop-up ad.

H.R. 8373 would allow providers to administer non-FDA-approved abortion

pills under the guise of preventing pregnancy without considering the side effects, the overall safety of the drug, or its intended use.

And I would inform the majority leader that in 1965, the ability to pop a pill to terminate a pregnancy didn't even exist, so it is, therefore, not considered a right.

This bill will send Federal tax dollars to Planned Parenthood, override State laws, subvert parental rights, and void requirements for informed consent for sterilizations.

This is not about protecting access to contraception, but, rather, federally subsidizing abortion providers and allowing unapproved, dangerous contraceptive drugs to be widely available.

This bill is the Democrats' latest attempt at normalizing the radical agenda. Just last week, we voted on Democrats' abortion-on-demand bill that advocated abortion until the birth of a child. You want to talk about extreme?

I am so sick of hearing about what women's rights are from a party that can't even define what a woman is.

I stand in front of you, a very proud woman, and I can tell you that aborting a fully formed child is not a woman's right. The abortion industry continues to lie to women and put their lives at risk in order to line their pockets, with the full support of my colleagues on the left.

I urge my colleagues to vote against H.R. 8373 and work on moving legislation that protects the unborn and empowers their mothers.

Mr. PALLONE. Madam Speaker, may I inquire as to the time that remains on both sides?

The SPEAKER pro tempore (Ms. BROWN of Ohio). The gentleman from New Jersey has 14¾ minutes remaining.

The gentlewoman from Washington has 8¾ minutes remaining.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentlewoman from California (Ms. JACOBS) who is a co-lead on this legislation.

Ms. JACOBS of California. Madam Speaker, I thank the chairman for making sure this bill could come to the floor so swiftly. I thank my friend, Congresswoman MANNING, for her partnership on co-leading this bill with me. And I thank Speaker PELOSI for her continued leadership in this post-Roe reality.

Madam Speaker, this bill could not be more important because, for me and for tens of millions of Americans, these threats from Justice Thomas and the Supreme Court to take away our right to contraception are not abstract.

I have lived my entire life with this constitutional right to contraception, and it is a right I have exercised for decades, whether it was the birth control pills I used when I was a teenager to address debilitating cramps, the IUD I have relied on for years, or the Plan B I have used at times that was, thankfully, available over the counter when I needed it.

I am probably the first person ever to speak about using Plan B on the House floor, and I know I am the first person in at least 35 years to talk about my period here. But you know what? We should be talking about it.

We should be talking about periods and birth control and the healthcare that millions of Americans need for our everyday lives because this is not a side issue that only affects some people. This is a kitchen-table issue.

The decision of how, if, and when to grow a family are decisions that are personal and private and should never be decided by the Supreme Court or Congress. It is a decision that is fundamental to our autonomy, our agency, and our ability to control our own lives.

As a young woman, reproductive healthcare is my healthcare, and I am so grateful that, today, we will take a step to codifying that access into law.

I urge my colleagues to support this bill.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Pennsylvania (Mr. JOYCE), a leader on the Energy and Commerce Committee.

Mr. JOYCE of Pennsylvania. Madam Speaker, I thank the gentlewoman for yielding.

I rise today in opposition to this legislation that has been rushed to the floor with no oversight, and without a single hearing in the Energy and Commerce Health Subcommittee, the subcommittee of jurisdiction.

It is clear that the majority is, once again, trying to score cheap political points in the press and, in the process, the patients' and their health outcomes have not been evaluated.

This type of political malpractice would be similar to a doctor who prescribes a medication or recommends a surgery without doing the evaluation of the patient, without doing the due diligence, and without discussing the course of treatment which is best.

We cannot continue to rush to legislation without seeing the entire picture.

As a doctor, and as a Representative, I urge my colleagues to reject this bill and allow the committee of jurisdiction to do the work that is necessary in order to bring effective legislation to the floor.

□ 1015

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Texas (Ms. JACKSON LEE).

Ms. JACKSON LEE. Madam Speaker, my friends on the other side of the aisle must have amnesia. You know why we are on this floor today? Because of the Dobbs case from a runaway Supreme Court, dominated by Members who answered that they understood precedent in *Roe v. Wade* and ignored it.

I thank Congresswoman MANNING and all of the cosponsors who recognize that we have to methodically protect

women. Do you know what is happening to doctors? Every news station will have doctors on, frightened about what they should do about women's healthcare.

This is important legislation, Right to Contraception, because it does deal with menstrual regulation, endometriosis, or hormonal imbalance.

Teenagers are given this because of menstrual problems, but those who don't understand this, they are standing on the floor talking about this is a runaway bill.

If it is coronavirus, the monkey pox, or any other health matter, it is Democrats who are saving America. This legislation is definitely needed because the Supreme Court has trampled on the Constitution, trampled on the Ninth Amendment, trampled on equal protection under the law.

I support H.R. 8373. The women who are in need, who are vulnerable, who are individuals, who are minority women need this legislation.

Madam Speaker, I am proud to rise in strong support of H.R. 8373, the "Right to Contraception Act."

H.R. 8373 would expressly assert the right of an individual to obtain and utilize contraception.

This would include any FDA approved device or medication used to prevent pregnancy, whether specifically used for that goal, or for other health needs like menstrual regulation, endometriosis, or hormonal imbalance.

Additionally, the "Right to Contraception Act" would outline the rights of healthcare providers to prescribe and dispense contraceptives and relevant information to patients.

This bill would require lawmakers who attempt to place additional requirements on providers or access to contraception to prove that the requirement significantly advances access to contraceptives and that access could not be better achieved by other methods.

Birth control pills, IUDs, and other forms of contraception are all forms of safe and essential healthcare.

They are central to women's ability to participate equally in the workplace, in academia, and in society.

The right to contraceptives has long been an expectation held by the American people.

In 1965, the United States Supreme Court's decision in *Griswald v. Connecticut* affirmed a married couple's right to birth control. In 1972, *Eisenstadt v. Baird* protected that right for single people. Then in 1977, the right to contraception for minors was secured in *Carey v. Population Services International*.

For more than 50 years, the right to contraception has been settled law.

That is, until the Supreme Court's recent ruling in *Dobbs v. Jackson Women's Health Organization*, when five conservative Justices chose to let their personal opinions and beliefs supersede decades of established precedent by overturning women's right to abortion.

Since then, the American people have witnessed the abhorrent consequences of Republicans' radical agenda to criminalize women's reproductive health decisions.

In his concurring opinion, Justice Clarence Thomas made it very clear that the extremist ruling that ended *Roe v. Wade* could be used to chop away at other rights—including the right to access contraception.

Reproductive rights opponents are now including emergency contraception, IUDs, and other forms of birth control in their anti-abortion legislation.

These anti-abortion laws shackle women to unwanted pregnancies.

Conservative lawmakers now seek to stop women from exerting agency over the prevention of pregnancy, as well.

If a woman is not permitted to end a pregnancy, and she is not permitted to prevent a pregnancy, I ask you, what rights to her body does she have left?

The ability to make personal choices about one's own body is the most basic of fundamental human rights.

That right is engraved into the very foundation of our Nation and inked into the hallowed lines of the U.S. Constitution.

Do we not uphold our Constitution for its promise of life, liberty, and pursuit of happiness?

How then, can we withhold those rights from half of our population by robbing women of agency over their bodies?

In 1965, the United States Supreme Court made the 7–2 *Griswold v. Connecticut* ruling that established the right for married couples to utilize contraception.

This decision was not determined by the personal belief systems of those Justices nor their approval or disapproval of contraception.

No, the right to access contraception was upheld by the promise of unenumerated rights and due process for all American people—as outlined in the United States Bill of Rights.

As my colleagues know, the 9th Amendment states that the federal government does not retain final authority over the rights that are not listed in the Constitution.

The Bill of Rights does not exhaust all the rights retained by the people.

Instead, those undocumented rights belong to the people, as does the right to contraception.

Also, as a hallmark of democracy, the 14th Amendment ensures that no right afforded to the American people can be taken away without due process of law, while also guaranteeing all Americans that they shall have equal protection under the law.

The assurances of the 14th Amendment became part of our national governing documents as a protection against those who would use their power to wipe away the freedoms of others without restraint or consent of the governed.

Unfortunately, it is just as necessary and relevant today as it was when it was ratified in 1868.

Even before the barbaric *Dobbs* ruling, conservative lawmakers across the country have been moving to limit women's ability to make decisions about their own healthcare and bodies.

In 2021 alone, at least 4 states attempted to ban access to some or all contraceptives by restricting public funding for these products and services.

Those laws work in conjunction with actions conservative legislators in red states have taken to curtail funding for family planning services at reproductive health centers like Planned Parenthood.

Such actions would limit access to birth control, particularly for Black and Brown low-income women.

A 2010 study found that access to contraceptive care resulted in approximately one million fewer unplanned conceptions per year.

That is one million fewer children born into families who are unprepared to support them.

When access to contraceptives is limited, more children are born into lives of difficulty and hardship.

After Texas Republicans excluded Planned Parenthood from its public family planning program for low-income women, there was a 35 percent drop in prescriptions for long-acting, reversible contraceptives and a 31 percent drop in the use of injectable contraceptives.

This caused a more than 25 percent increase in unintended births—largely among Black and Brown low-income women.

H.R. 8373, the “Right to Contraception Act,” would help ensure that children are born into families who are eager, equipped, and prepared for their arrival.

We cannot allow human rights to be so callously stripped away from the American people.

We must fight back and codify these rights into law.

Contraception allows individuals, couples, and families to be in control of their own futures.

Contraception can allow a young woman to achieve her dreams of earning a college degree.

It can allow a young couple to prioritize their careers before raising a child.

It can allow parents to focus their financial and emotional resources on the care of a special needs son or daughter.

It is a tool that allows those who wish to become parents, and those who do not, the agency to make the decision that is best for them.

The Right to Contraception Act asserts that we will no longer allow the human rights of women to be infringed.

If conservative legislators and conservative Justices intend to continue to attempt to limit access to reproductive rights, we will fight back.

We will not allow women to be regulated like reproductive chattel.

American women deserve to have the final authority over their own bodies and their own lives, including whether or not to become pregnant and become a parent.

Contraception is on the front lines of this battle.

That is why I support H.R. 8373, the “Right to Contraception Act,” and encourage my colleagues to do so as well.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. LEE), the co-chair of the Pro-Choice Caucus.

Ms. LEE of California. Madam Speaker, I rise in strong support of H.R. 8373, of which I am a proud original cosponsor. I thank Congresswoman MANNING for her tremendous leadership and also Chairman PALLONE and Speaker PELOSI for bringing this bill to the floor.

As co-chair of the Pro-Choice Caucus, I know how important this bill is, especially after the Supreme Court's recent decision overturning abortion access.

Radical extremists have been clear that they will be going after rights like

contraception next, and that is just downright outrageous.

It is hard to imagine so many freedoms are being taken away: abortion and contraception, no access to family planning, and, of course, no support at all from Republicans for comprehensive sex education.

Everyone should have the freedom to make decisions about their bodies, their lives, and their future. That includes the right to choose which FDA-approved method of contraception is best for them.

The Pro-Choice Caucus, and many of us, have urged the FDA to make birth control available over the counter. Safety and efficacy are extremely important, and I urge the FDA to move quickly but carefully. Birth control must be safe. I urge my colleagues to vote “yes.”

Mrs. RODGERS of Washington. Madam Speaker, I yield 1½ minutes to the gentlewoman from New York (Ms. TENNEY).

Ms. TENNEY. Madam Speaker, my new district is actually where Susan B. Anthony, a pro-life woman Republican who got us our right to vote, actually was tried for voting. I am just happy and proud to represent that district.

We are elected Representatives. We should respect the Constitution and due process by debating these issues through regular order, getting the input from the people we represent, not the political partisans on one side or the other.

If we allow the majority to undermine constitutional safeguards for an imagined and fake emergency, they will create more imagined emergencies in the future to violate and undermine our constitutional principles and the right of the people to have a voice through representative government.

The law is clear. For years, the Supreme Court has consistently found that Americans continue to have access to many safe forms of contraceptives. Yet, we are here today, listening to another imagined emergency to try to repeal this right. The right to contraception is safe. This is not an emergency.

Justice Alito's majority decision in *Dobbs versus Jackson* was clear. The decision to return the issue of abortion to the States does not impact other issues like marriage or contraception as stated numerous times by Justice Alito in his opinion.

The real reason we are here today is because some of our colleagues would like to distract and scare the American people and score cheap political points rather than tackle the bread-and-butter issues affecting all Americans.

The majority won't admit that their radical spending and war on energy have driven inflation and gas prices to record levels.

Madam Speaker, I urge my colleagues to vote “no.”

Mr. PALLONE. Madam Speaker, I yield 1 minute now to the gentlewoman from Massachusetts (Ms. CLARK), our Assistant Speaker.

Ms. CLARK of Massachusetts. Madam Speaker, today we vote to protect the right to obtain and use birth control, a choice that should be yours and yours alone.

As a reminder, the year is 2022, not 1922, not 1822. It is well established. Birth control is central to a person's ability to plan their future, to care for their families, get an education, have a career.

But the extremist Republican Party is determined to take us back in time and take away our freedoms. Politicians have no business in your bedroom or your doctor's office.

They are coming for birth control. They are coming for IVF. We have seen the plans. We have seen the legislation. House Democrats are taking a stand. We will defend our rights and defeat the Republicans' assault on freedom.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1¼ minutes to the gentleman from New Jersey (Mr. SMITH), a champion for life.

Mr. SMITH of New Jersey. Madam Speaker, several pro-abortion policies are embedded in this bill, including section 4(b)(1), which states that "any healthcare providers who provide contraceptives may not be singled out through any limitation or requirement."

What does that language mean? Simply put, any Federal or State policy that ensures that taxpayer-funded family planning clinics are not colocated with abortion clinics would now be absolutely prohibited under the bill.

In 2019, President Trump promulgated the protect life rule, reestablishing Ronald Reagan's Title X rule that prohibited taxpayer funding of the hundreds of family planning clinics that were colocated with abortion clinics. All funds were then redirected to family planning clinics that were not taking the lives of unborn babies.

The original Title X statute of 1970 made clear that voluntary family planning projects should not be in a program where abortion is a method of family planning. President Reagan issued that rule in 1988. It was upheld by the U.S. Supreme Court in *Rust v. Sullivan*.

Any future President now, if this legislation is enacted, would be precluded by law from reestablishing the protect life rule or any similar policy. Madam Speaker, Title X was intended to be about family planning, not abortion promotion.

Mr. PALLONE. Madam Speaker, may I ask, again, about the time remaining?

The SPEAKER pro tempore. The gentleman from New Jersey has 10¼ minutes remaining. The gentlewoman from Washington has 5 minutes remaining.

Mr. PALLONE. Madam Speaker, I yield 1½ minutes to the gentlewoman from Colorado (Ms. DEGETTE), the chairwoman of the Subcommittee on Oversight and Investigations.

Ms. DEGETTE. Madam Speaker, at the hearing I had on this issue in my subcommittee the other day, Dr.

Resneck, the president of the AMA, said he doesn't want to have, when he is in clinic with a patient, a State Attorney General sitting on his shoulder.

I know how he feels because many of my colleagues on the other side not only want to stop a patient's ability and decision to have an abortion, they apparently want to tell people now what kinds of birth control they can use.

Today I have heard my colleagues on the other side say falsely that IUDs, that chemical birth control, that other forms of birth control are "abortifacients." Not only is this patently untrue, but it harms millions of Americans.

I would say that I think everybody listening to this debate is probably confused. My colleagues say, oh, we support birth control. But make no mistake about it, there have been bills in a number of States, and there have been bills in this body to ban common forms of birth control—not abortion, birth control—and that has got to stop.

My colleagues across the aisle, they think that the rhythm method or condoms or something like that are okay, but the things women use to stop getting pregnant can't be used, and I think that is important to point out.

I think every woman in America needs to know this, and, frankly, every patient in America should be able to make their open decision about their healthcare for abortion and birth control.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Florida (Ms. LOIS FRANKEL), co-chair of the Democratic Women's Caucus.

Ms. LOIS FRANKEL of Florida. Madam Speaker, my, my. Mark my words. The Supreme Court's decision to dismantle abortion was just the start of extreme unnecessary intrusion of our personal lives by Republicans.

Next on their list? Limit the right to buy and use the birth control that give women the ability to plan their families.

Listen to this: This is not imaginary. This is happening right now. Madam Speaker, I was in the room during committee debate when Republicans tried to go back to the horse-and-buggy days of birth control.

On birth control counseling, condoms only, they said, say no to even the mention of medically approved contraception like implants and IUDs. Really? That is crazy, and that is why we need to pass this bill right now, the Right to Contraception Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. PELOSI), the Speaker of the House.

Ms. PELOSI. Madam Speaker, I thank the gentleman for yielding.

I know that your committee, Energy and Commerce, has a full legislative load, and you prioritized this and made the time so that we could bring this to the floor in a timely fashion because it means so much.

As our distinguished colleague from Florida, Congresswoman FRANKEL, said, my, my. Here we are.

I rise today in strong support of the Right to Contraception Act, which is to defend access to birth control from the radical rightwing assault on reproductive rights.

It is outrageous that nearly 60 years after Griswold was decided, women must, once again, fight for fundamental freedom to determine the size and timing of their families or if they even want young people having contraception in their exercise of freedom.

But as Republicans turn back the clock on contraception, Democrats today are making it clear we are not going back.

I wonder if some of our colleagues, or even people who are advocating to prevent contraception, know what is going on in their own families, with their spouses or with their children, and the rest. Could it be that they are all just not using contraception?

Again, thank you to KATHY MANNING, our lead sponsor. She has been so courageous so early on this subject, and I congratulate her and her staff for being so ready, as I commend the chairman, for accommodating the legislation.

I also join in thanking SARA JACOBS, ANGIE CRAIG, and NIKEMA WILLIAMS, her cosponsors, on this legislation. Again, thank you, Chairman PALLONE for your support.

Let's be clear, that punishing and controlling women for using birth control is just another plank in the Republican extreme agenda for America, but House Democrats are fighting back.

Our Right to Contraception Act enshrines into law the unequivocal statutory right to obtain and use contraception, and it protects against any extremist State laws that would seek to restrict that access.

That way, even if the radical Republican supermajority on the Supreme Court succeeds in its mission to overturn *Griswold*, no American can be denied the basic right to birth control through contraception.

This is a matter of women's health to prevent unintended pregnancies and to treat or prevent many medical conditions.

Contraception is a medical tool beyond contraception. This is a matter of economic justice. This is a kitchen-table issue for America's families, as access to contraception is linked to higher rates of education and employment, while reducing poverty.

□ 1030

This is an assault on lower-income people in our country, many of them people of color. This is an economic justice assault, as well.

Importantly, this is a matter of fundamental freedom to make your own

decisions about your own body and your own life. Proudly, the people are with us: 96 percent of voters agree that Americans should have access to contraception.

By passing the Right to Contraception Act, House Democrats take another strong step to protect freedom for women and for every American.

Last week, our proud pro-choice, pro-women Democratic majority passed two major bills to restore and protect health freedom.

Our Ensuring Women's Right to Reproductive Freedom Act will protect the fundamental right to travel and obtain needed healthcare. That passed the House last week.

Our Women's Health Protection Act will restore the essential protections of *Roe v. Wade* all across the country.

Republicans have been clear, Madam Speaker, and the Republican leader in the Senate has been clear: The goal is to ban abortion in our country. The Associate Justice of the Court has been clear; we have only just begun to overturn women's rights and individual freedom and privacy when it comes to interaction among us all.

Earlier this week, the House passed the landmark Respect for Marriage Act to ensure that marriage equality remains the law of the land now and for generations to come, whether it is interracial marriage, whatever.

Let's be clear. Those who have opposed this vital legislation are only revealing their dark desire to punish and control Americans' most intimate and personal decisions.

Madam Speaker, those of us who have served here for a while can tell you that House Republicans have been against contraception for decades. I couldn't even get our colleagues to vote for natural family planning.

When the Catholic Church came to us and said we need a correction in the law so that funds for natural family planning can go forth, Republican colleagues said: Let us be clear. We are against family planning domestically or internationally, globally.

We had one Republican vote with us and were able to pass the legislation, as requested by the Catholic Church.

What is this about? They are against birth control, but they are for controlling women. This is about servitude. This is about servitude.

We couldn't convince people. I would say to people that this isn't just about abortion. I understand people's position on that. I come from a pro-life family. I respect people's views. But this is about more than that. This is about contraception, birth control, family planning. But now it is clear.

Today, we will have a vote on the right to contraception, and we will see where our Republican friends are. I hope they will be with us. We don't put this bill forth to put you on the spot. We put this forth to put women in control of their situation.

I ask those who oppose contraception, again, do you even know what is

going on in your own families? Why don't you ask? Do we need a session on the birds and the bees to talk about why this is important? What is going on here? Is the blind desire to have women controlled and in servitude such that they don't even want to know the truth about family planning and contraception?

It is never too late, even though you may have opposed this in the past, to stand up for the rights of your wives, your daughters, your granddaughters, and all of America's women.

Madam Speaker, I urge a strong, hopefully bipartisan vote for the Right to Contraception Act. I thank the makers of this motion; I thank the gentlewoman from North Carolina (Ms. MANNING) for her leadership, the gentlewoman from California (Ms. JACOBS), the gentlewoman from Georgia (Ms. WILLIAMS), the gentlewoman from Minnesota (Ms. CRAIG), and so many other cosponsors for their leadership. There is a long list of cosponsors, over 150 immediately. I very much thank the chairman for making this possible today.

Madam Speaker, I urge an "aye" vote.

Mrs. RODGERS of Washington. Madam Speaker, again, so proud that it was pro-life Republican women like Susan B. Anthony who led the right to vote over 100 years ago. Just to correct the record, both Speaker PELOSI and Majority Leader HOYER suggested that there was a legislative hearing. I don't remember any legislative action. I would ask the chairman, was there any legislative action on this bill?

Mr. PALLONE. Will the gentlewoman yield?

Mrs. RODGERS of Washington. I yield to the gentleman from New Jersey.

Mr. PALLONE. Madam Speaker, they weren't suggesting that there was a legislative hearing, just that the Energy and Commerce Committee worked to get this bill drafted with Ms. MANNING and her staff.

Mrs. RODGERS of Washington. Reclaiming my time, Congresswoman DIANA DEGETTE, my colleague on the committee, said that we had a hearing. It was an Oversight and Reform Committee hearing on Dobbs. I want to quote because what the Democrat witness said confirms the Democrats' abortion on demand until birth act. The Democrat witness said: People find out they need abortions through their pregnancies, yes, at any time for any reason. The issue at hand is the Democrats' extreme agenda, abortion on demand up until birth.

Madam Speaker, I yield 2 minutes to the gentlewoman from Oklahoma (Mrs. BICE), a proud member of the class of 2020 with record Republican women.

Mrs. BICE of Oklahoma. Madam Speaker, I am offended that the other side of the aisle would make false accusations about Republicans' positions on contraception. This is fearmongering of the highest degree.

I rise in strong opposition to H.R. 8373, the so-called Right to Contraception Act. This problematic legislation reinforces the left's pro-abortion agenda by utilizing an overly broad definition of contraception that includes pregnancy-terminating abortion drugs.

My colleagues on the other side of the aisle would incorrectly have the American people believe that Republicans don't care about women's access to contraception. This is false. In fact, a report released just this week by the Independent Women's Voice demonstrated that 84 percent of Republican primary voters support safe access to contraceptives.

I am pro-life, and I support a woman's right to access contraception. That is why I introduced H.R. 8421, the Access to Safe Contraception Act, which would preempt States from establishing a ban on contraceptives while still respecting pro-life values. My legislation would safeguard access to contraception for Americans, including my two daughters, and importantly, does not protect the use of pregnancy-ending medications, such as chemical abortion pills.

I am also concerned that the bill we are considering today could endanger women by allowing the use of products or methods that are not FDA-approved.

Madam Speaker, I say to my colleagues that we should reject this bill and instead bring up legislation to protect access to contraception in a way that respects the pro-life values of millions of Americans.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. CHU).

Ms. CHU. Madam Speaker, as the chair of the Contraception and Family Planning Task Force of the Pro-Choice Caucus and as a woman who lives in America, I rise today in strong support of the Right to Contraception Act, which would ensure every American has the federally protected right to access the birth control method that works for them.

Birth control is healthcare, plain and simple, and it is critical to women's health and women's equality. And no one—not the Supreme Court, not Congress, not your boss—should be able to interfere with your family decisions.

We have seen just how far this Court of unelected Justices will go to erode our constitutionally protected rights, which is why I am proud to support this very necessary bill today to create a Federal right for providers to provide and patients to receive contraceptive services.

Madam Speaker, it is of great urgency that this House pass this critical bill today and afford us the agency to make our own healthcare decisions.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentleman from Tennessee (Mr. COHEN).

Mr. COHEN. Madam Speaker, the Republicans are so upset. The reality is it

is their Supreme Court and Justice Alito who opened Pandora's box. When we opened up the box and looked in, we saw there were nesting eggs. There were all kinds of issues there that were going to come to the fore.

Clarence Thomas put a spotlight on it. It involved gay marriage and contraception. It was going to go further than *Roe v. Wade*. When they said they were originalists, we didn't realize what they meant by "originalist" was everything origin came from them. They didn't care about precedent.

Alito said *Roe v. Wade* was important precedent. Gorsuch and Kavanaugh said it was precedent that *Roe v. Wade* was settled. You can't trust the Supreme Court. They are radicals. They want to overturn privacy rights for all people in this country.

Freedom is at stake. This bill needs to pass, and the only reason this bill is properly before this Congress is because of that Supreme Court that has gone off the radical right.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from North Carolina (Ms. ADAMS.)

Ms. ADAMS. Madam Speaker, I rise today in strong support of the Right to Contraception Act.

Family planning is a private decision, and contraception should always be legal, from prophylactics to Plan B.

The Supreme Court's decision in *Dobbs* has opened Pandora's box. For some Justices, judges, and State legislators, the next steps include rolling back established rights and precedents, including the right to contraception.

That is why the Right to Contraception Act is so important. This legislation establishes a statutory right to obtain contraceptives and for healthcare providers to provide them. It protects Americans from State and local legislation that would deny people's access to contraceptives.

From reproductive care to LGBTQ rights, and now to contraceptives, Congress has a responsibility to stop State governments from rolling back our rights. My granddaughters shouldn't have fewer rights than my daughter had. Pass the Right to Contraception Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Massachusetts (Mrs. TRAHAN), a member of our committee.

Mrs. TRAHAN. Madam Speaker, standing here today, 4 weeks after the Supreme Court's disastrous decision to overturn *Roe*, I fear for the future of my children.

I fear for a future where Republican leaders agree with Clarence Thomas that the right for same-sex marriage should be revisited, that the right to birth control should be reexamined. Let me be clear: Neither of those rights should be up for debate.

We voted this week to protect marriage equality. We will vote today to protect contraception. For those who believe this issue isn't on the minds of millions of Americans, open your eyes. Republicans in Idaho and Louisiana are pushing to ban forms of birth control. The Governor of Mississippi refused to rule out a contraception ban. Even the Republican Study Committee, which represents most House Republicans, has proposed eliminating contraception access programs for low-income Americans. That is not pro-life. It is antiwoman.

Wake up already and join us in passing this critical legislation.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I ask you one more time how much time remains on each side.

The SPEAKER pro tempore. The gentleman from New Jersey has 2¼ minutes remaining. The gentlewoman from Washington has 2¼ minutes remaining.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from New York (Mrs. CAROLYN B. MALONEY).

Mrs. CAROLYN B. MALONEY of New York. Madam Speaker, there is no democracy if women do not have control over their own bodies, including reproductive healthcare.

Twenty-seven days ago, an extremist majority on the Supreme Court fulfilled the Republican Party's decades-old goal of overturning *Roe v. Wade*. Next on the chopping block is marriage equality and contraception.

Make no mistake, these rightwing extremists are not pro-life but pro-government controlling the bodies of women and girls. Their goal is to ban abortion in this country.

Today, the House will pass Congresswoman MANNING's Right to Contraception Act, which would codify the right to access birth control into Federal law. I urge my colleagues in the Senate to pass this bill immediately so that people have the freedom to make their own decisions about their futures.

We will not go back. Pass this bill. It is fundamental to democracy.

□ 1045

Mrs. RODGERS of Washington. Madam Speaker, I yield the balance of my time to the gentlewoman from Iowa (Mrs. HINSON), another dynamic leader from the freshman class of 2020.

Mrs. HINSON. Madam Speaker, I rise today to present a reasonable solution to a challenge that millions of American women face: access to birth control.

Seventy percent of women aged 18 to 64 reported using oral contraceptives throughout their lifetime. A majority of women also support making birth control available over the counter without a prescription. That is why I will be offering a motion to recommit this bill in a few moments, to stand for those women.

Women should be able to access their preferred birth control method conveniently. Unfortunately, that is not the reality for many women. In rural Iowa, some women have to drive an hour to be able to see a gynecologist. That means taking a day off of work, finding additional childcare, spending hours in a car, and paying expensive gas prices to get there.

This is unreasonable when we have safe and effective birth control options that have been FDA-approved that still aren't available over the counter.

My amendment would require the FDA to give priority review for over-the-counter access to routine-use oral contraceptives that the agency has already deemed safe for women aged 18 and up.

I want to emphasize that this is for regular birth control pills, not emergency contraceptives like Plan B.

Making birth control available over the counter would have a significant impact on women's lives. My colleagues across the aisle give you a whole lot of lip service about supporting women. They claim that their policies, no matter how far outside of the mainstream, are the only way to support women. That is just not true.

Madam Speaker, I am proposing a solution today that the overwhelming majority of American women agree with, making their regular birth control pill available at their local pharmacy.

We have an opportunity here to work together to enact meaningful legislation that will benefit women. Instead, my colleagues on the other side of the aisle have offered a bill that I simply cannot support. Their bill attacks conscience protections for providers, expands access to abortion pills, and risks women's health.

But I am not willing to vote "no" and just give up on this, so that is why I am offering a solution that we should all be able to get behind. We should work together to make oral contraceptives more accessible.

I ask my colleagues to vote "yes" on the motion to recommit today, adopt my amendment, and give women an over-the-counter option for birth control.

Madam Speaker, I ask unanimous consent to insert the text of my amendment into the RECORD prior to the vote on my motion to recommit.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Iowa?

There was no objection.

Mrs. RODGERS of Washington. Madam Speaker, I yield back the balance of my time.

Mr. PALLONE. Madam Speaker, I yield myself the balance of my time.

I have heard many unfounded claims from the Republicans today, claims that this bill would prevent the FDA from acting to remove unsafe products or somehow direct funding for abortion.

This bill simply provides a right to contraception. Republicans are trying

to distract from their poor record on women's health. The half-measures that Republicans are purporting to bring forward today do not establish a right to contraception, nor do they ensure that hostile State legislators can't take away birth control in the future.

Only the Right to Contraception Act ensures that. That is why I support this legislation, and I hope my colleagues will, as well.

Madam Speaker, I urge everyone to vote "yes" on this bill, and I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 1232, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT

Mrs. HINSON. Madam Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Mrs. Ashley Hinson of Iowa moves to recommit the bill H.R. 8373 to the Committee on Energy and Commerce.

The material previously referred to by Mrs. HINSON is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Allowing Greater Access to Safe and Effective Contraception Act".

SEC. 2. SUPPLEMENTAL APPLICATIONS FOR OVER-THE-COUNTER CONTRACEPTIVE DRUGS.

(a) PRIORITY REVIEW OF APPLICATION.—The Secretary of Health and Human Services (referred to in this section as the "Secretary") shall give priority review to any supplemental application submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(b)) if—

(1) the supplemental application is with respect to an oral contraceptive drug intended for routine use;

(2) the supplemental application is not with respect to any emergency contraceptive drug; and

(3) if the supplemental application is approved, with respect to individuals aged 18 and older, such drug would not be subject to section 503(b)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 353(b)(1)).

(b) FEE WAIVER.—The Secretary shall waive the fee under section 736(a)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 379h(a)(1)) with respect to a supplemental application that receives priority review under subsection (a).

(c) OVER-THE-COUNTER AVAILABILITY.—Notwithstanding any other provision of law, with respect to individuals under age 18, a contraceptive drug that is eligible for priority review under subsection (a) shall be subject to section 503(b)(1) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 353(b)(1)), including after approval of the supplemental application as described in subsection (a)(3).

(d) APPLICABILITY.—This section applies with respect to a supplemental application described in subsection (a) that—

(1) is submitted before the date of enactment of this Act and remains pending as of such date of enactment; or

(2) is submitted after such date of enactment.

Amend the title to read as follows: "A bill to increase access to safe and effective oral contraceptives, and for other purposes."

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Mrs. HINSON. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of Rule XX, the Chair will reduce to 5 minutes the minimum time for any electronic vote on the question of passage.

The vote was taken by electronic device, and there were—yeas 190, nays 234, not voting 6, as follows:

[Roll No. 384]

YEAS—190

Aderholt	Fulcher	McClain
Allen	Gaetz	McClintock
Amodei	Gallagher	McHenry
Armstrong	Garbarino	Meijer
Arrington	Garcia (CA)	Meuser
Babin	Gibbs	Miller-Meeks
Bacon	Gimenez	Moolenaar
Baird	Gonzales, Tony	Mooney
Balderson	Good (VA)	Moore (AL)
Banks	Gooden (TX)	Moore (UT)
Barr	Gosar	Mullin
Bentz	Granger	Murphy (NC)
Bergman	Graves (LA)	Nehls
Bice (OK)	Graves (MO)	Newhouse
Bilirakis	Green (TN)	Norman
Bishop (NC)	Greene (GA)	Obornolte
Bost	Griffith	Owens
Brady	Grothman	Palazzo
Brooks	Guest	Palmer
Buchanan	Guthrie	Pence
Buchon	Harshbarger	Perry
Budd	Hern	Pfleger
Burgess	Herrell	Posey
Calvert	Herrera Beutler	Reschenthaler
Cammack	Higgins (LA)	Rice (SC)
Carey	Hill	Rodgers (WA)
Carl	Hinson	Rogers (AL)
Carter (GA)	Hollingsworth	Rogers (KY)
Carter (TX)	Hudson	Rose
Cawthorn	Huizenga	Rouzer
Chabot	Issa	Rutherford
Cheney	Jackson	Salazar
Cloud	Jacobs (NY)	Scalise
Clyde	Johnson (LA)	Schweikert
Cole	Johnson (OH)	Scott, Austin
Comer	Johnson (SD)	Sessions
Conway	Jordan	Simpson
Crawford	Joyce (OH)	Smith (MO)
Crenshaw	Joyce (PA)	Smith (NE)
Curtis	Katko	Smucker
Davidson	Keller	Staubert
DesJarlais	Kelly (MS)	Steel
Diaz-Balart	Kelly (PA)	Stefanik
Donalds	Kim (CA)	Steil
Duncan	Kustoff	Steube
Dunn	LaHood	Stewart
Ellzey	LaMalfa	Taylor
Emmer	Lamborn	Tenney
Estes	Latta	Thompson (PA)
Fallon	LaTurner	Tiffany
Feenstra	Lesko	Timmons
Ferguson	Letlow	Turner
Fischbach	Long	Upton
Fitzgerald	Loudermilk	Valadao
Fitzpatrick	Lucas	Van Drew
Fleischmann	Luetkemeyer	Van Duyne
Flood	Mace	Wagner
Flores	Malliotakis	Walberg
Fox	Mann	Walorski
Franklin, C.	Mast	Waltz
Scott	McCarthy	Weber (TX)

Webster (FL)
Wenstrup
Westerman

Williams (TX)
Wilson (SC)
Wittman

Womack
Zeldin

NAYS—234

Adams	Gohmert	Neguse
Aguilar	Golden	Newman
Allred	Gomez	Norcoss
Auchincloss	Gonzalez (OH)	O'Halleran
Axne	Gonzalez,	Ocasio-Cortez
Barragan	Vicente	Omar
Bass	Gottheimer	Pallone
Beatty	Green, Al (TX)	Panetta
Bera	Grijalva	Pappas
Beyer	Harder (CA)	Pascarell
Biggs	Harris	Payne
Bishop (GA)	Hartzler	Perlmutter
Blumenauer	Hayes	Peters
Blunt Rochester	Hice (GA)	Phillips
Boebert	Higgins (NY)	Pingree
Bonamici	Himes	Pocan
Bourdeaux	Horsford	Porter
Bowman	Houlihan	Pressley
Boyle, Brendan	Hoyer	Price (NC)
F.	Huffman	Quigley
Brown (MD)	Jackson Lee	Raskin
Brown (OH)	Jacobs (CA)	Rice (NY)
Brownley	Jayapal	Rosendale
Buck	Jeffries	Ross
Bush	Johnson (GA)	Roy
Bustos	Johnson (TX)	Roybal-Allard
Butterfield	Jones	Ruiz
Carbajal	Kahele	Ruppersberger
Cardenas	Kaptur	Rush
Carson	Keating	Ryan
Carter (LA)	Kelly (IL)	Sánchez
Cartwright	Khanna	Sarbanes
Case	Kildee	Scanlon
Casten	Kilmer	Schakowsky
Castor (FL)	Kim (NJ)	Schiff
Castro (TX)	Kind	Schneider
Cherfilus-	Kinzing	Schrader
McCormick	Kirkpatrick	Schrier
Chu	Krishnamoorthi	Scott (VA)
Cicilline	Kuster	Scott, David
Clark (MA)	Lamb	Sewell
Clarke (NY)	Langevin	Sherman
Cleaver	Larsen (WA)	Sherill
Cline	Larson (CT)	Sires
Clyburn	Lawrence	Slotkin
Cohen	Lawson (FL)	Smith (NJ)
Connolly	Lee (CA)	Smith (WA)
Cooper	Lee (NV)	Soto
Correa	Leger Fernandez	Spanberger
Costa	Levin (CA)	Speier
Courtney	Levin (MI)	Stansbury
Craig	Lieu	Stanton
Crist	Lofgren	Stevens
Crow	Lowenthal	Strickland
Cuellar	Luria	Suozi
Davids (KS)	Lynch	Swalwell
Davis, Danny K.	Malinowski	Takano
Dean	Maloney,	Thompson (CA)
DeFazio	Carolyn B.	Thompson (MS)
DeGette	Maloney, Sean	Titus
DeLauro	Manning	Tlaib
DeBene	Massie	Tonko
Demings	Matsui	Torres (CA)
DeSaulnier	McBath	Torres (NY)
Deutch	McCollum	Trahan
Dingell	McEachin	Trone
Doggett	McGovern	Underwood
Doyle, Michael	McNerney	Vargas
F.	Meeks	Veasey
Escobar	Meng	Velázquez
Eshoo	Mfume	Wasserman
Espallat	Miller (IL)	Schultz
Evans	Moore (WI)	Waters
Fletcher	Morelle	Watson Coleman
Foster	Moulton	Welch
Frankel, Lois	Mrvan	Wexton
Galleo	Murphy (FL)	Wild
Garamendi	Nadler	Williams (GA)
Garcia (IL)	Napolitano	Wilson (FL)
Garcia (TX)	Neal	Yarmuth

NOT VOTING—6

□ 1129

Mr. MCEACHIN, Ms. CHU, Messrs. MCNERNEY, DOGGETT, Mses. BLUNT ROCHESTER, SCHAKOWSKY, Mrs. CAROLYN B. MALONEY, Mr. NADLER, and Mrs. BOEBERT changed their vote from "yea" to "nay."

Mr. McHENRY changed his vote “nay” to “yea.”

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

MEMBERS RECORDED PURSUANT TO HOUSE
RESOLUTION 8, 117TH CONGRESS

Barragán (Beyer)	Gosar (Weber)	Rice (NY)
Bass	(TX))	(Deutch)
(Spanberger)	Houlahan	Ryan
Bergman	(Spanberger)	(Spanberger)
(Stauber)	Jeffries (Kelly)	Salazar (Moore)
Bowman	(IL))	(UT))
(Neguse)	Kahele (Correa)	Sires (Pallone)
Boyle, Brendan	Keating (Beyer)	Smucker (Keller)
F. (Beyer)	Kirkpatrick	Speier (Garcia)
Brownley	(Pallone)	(TX))
(Kuster)	Larson (CT)	Stevens (Kuster)
Bush (Kelly (IL))	(Himes)	Strickland
Carter (TX)	LaTurner (Mann)	(Kuster)
(Weber (TX))	Lawson (FL)	Swalwell
Cherfilus-	(Soto)	(Correa)
McCormick	Leger Fernandez	Taylor (Weber)
(Neguse)	(Correa)	(TX))
Crist (Soto)	Letlow	Thompson (MS)
DeFazio	(Fleischmann)	(Bishop (GA))
(Pallone)	Luetkemeyer	Valadao
Demings (Kelly	(McHenry)	(Garbarino)
(IL))	Meng (Kuster)	Walorski
Doyle, Michael	Mfume (Kelly	(Fleischmann)
F. (Pallone)	(IL))	Wasserman
Escobar (Garcia	Moore (WI)	Schultz (Soto)
(TX))	(Beyer)	Williams (GA)
Evans (Beyer)	Newman (Beyer)	(Neguse)
Foster	Palazzo	Wilson (SC)
(Spanberger)	(Fleischmann)	(Norman)
Gallego (Soto)	Pingree (Kuster)	
Gomez (Correa)	Porter (Neguse)	

MOMENT OF SILENCE IN MEMORY OF OFFICER
JACOB J. CHESTNUT AND DETECTIVE JOHN M.
GIBSON

The SPEAKER. The Chair asks all Members in the Chamber, as well as Members and staff throughout the Capitol, to observe a moment of silence in memory of Officer Jacob J. Chestnut and Detective John M. Gibson of the United States Capitol Police who were killed in the line of duty defending the Capitol on July 24, 1998.

The SPEAKER pro tempore (Ms. JACOBS of California). The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mrs. RODGERS of Washington. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 228, nays 195, answered “present” 2, not voting 6, as follows:

[Roll No. 385]

YEAS—228

Adams	Brown (OH)	Clark (MA)
Aguilar	Brownley	Clarke (NY)
Allred	Bush	Cleaver
Auchincloss	Bustos	Clyburn
Axne	Butterfield	Cohen
Barragán	Carbajal	Connolly
Bass	Cárdenas	Cooper
Beatty	Carson	Correa
Bera	Carter (LA)	Costa
Beyer	Courtwright	Courtney
Bishop (GA)	Case	Craig
Blumenauer	Casten	Crist
Blunt Rochester	Castor (FL)	Crow
Bonamici	Castro (TX)	Cuellar
Bourdeaux	Cheney	Davids (KS)
Bowman	Cherfilus-	Davis, Danny K.
Boyle, Brendan	McCormick	Dean
F.	Chu	DeFazio
Brown (MD)	Cicilline	DeGette

DeLauro	Langevin	Raskin
DeBene	Larsen (WA)	Rice (NY)
Demings	Larson (CT)	Ross
DeSaulnier	Lawrence	Roybal-Allard
Deutch	Lucas	Ruiz
Dingell	Lee (CA)	Ruppersberger
Doggett	Lee (NV)	Rush
Doyle, Michael	Leger Fernandez	Ryan
F.	Levin (CA)	Salazar
Escobar	Levin (MI)	Sánchez
Eshoo	Lieu	Sarbanes
Españalat	Lofgren	Scanlon
Evans	Lowenthal	Schakowsky
Fitzpatrick	Luria	Schiff
Fletcher	Lynch	Schneider
Foster	Mace	Schrader
Frankel, Lois	Malinowski	Schrier
Gallego	Maloney,	Scott (VA)
Garamendi	Carolyn B.	Scott, David
Garcia (IL)	Maloney, Sean	Sewell
Garcia (TX)	Manning	Sherman
Golden	Matsui	Sherrill
Gomez	McBath	Sires
Gonzalez (OH)	McCollum	Slotkin
Gonzalez,	McEachin	Smith (WA)
Vicente	McGovern	Soto
Gottheimer	McNerney	Spanberger
Green, Al (TX)	Meeks	Speier
Grijalva	Meng	Stansbury
Harder (CA)	Mfume	Stanton
Hayes	Moore (WI)	Stevens
Higgins (NY)	Morelle	Strickland
Himes	Moulton	Suozi
Horsford	Mrvan	Swalwell
Houlahan	Murphy (FL)	Takano
Hoyer	Nadler	Thompson (CA)
Huffman	Napolitano	Thompson (MS)
Jackson Lee	Neal	Titus
Jacobs (CA)	Neguse	Tlaib
Jayapal	Newman	Tonko
Jeffries	Norcoss	Torres (CA)
Johnson (GA)	O'Halleran	Torres (NY)
Johnson (TX)	Ocasio-Cortez	Trahan
Jones	Omar	Trone
Kahele	Pallone	Underwood
Kaptur	Panetta	Upton
Katko	Pappas	Vargas
Keating	Pascarell	Veasey
Kelly (IL)	Payne	Velázquez
Khanna	Pelosi	Wasserman
Kildee	Perlmutter	Schultz
Kimler	Peters	Waters
Kim (NJ)	Phillips	Watson Coleman
Kind	Pingree	Welch
Kinziger	Pocan	Weston
Kirkpatrick	Porter	Wild
Krishnamoorthi	Pressley	Williams (GA)
Kuster	Price (NC)	Wilson (FL)
Lamb	Quigley	Yarmuth

NAYS—195

Aderholt	Comer	Graves (MO)
Allen	Conway	Green (TN)
Amodei	Crawford	Greene (GA)
Armstrong	Crenshaw	Griffith
Arrington	Curtis	Grothman
Babin	Davidson	Guest
Bacon	DesJarlais	Guthrie
Baird	Diaz-Balart	Harris
Balderson	Donalds	Harshbarger
Banks	Duncan	Hartzler
Barr	Dunn	Hern
Bentz	Ellzey	Herrell
Bergman	Emmer	Herrera Beutler
Bice (OK)	Estes	Hice (GA)
Biggs	Fallon	Higgins (LA)
Bilirakis	Feenstra	Hill
Bishop (NC)	Ferguson	Hinson
Boebert	Fischbach	Hollingsworth
Bost	Fitzgerald	Hudson
Brady	Fleischmann	Huizenga
Brooks	Flood	Issa
Buchanan	Flores	Jackson
Buck	Fox	Jacobs (NY)
Bucshon	Franklin, C.	Johnson (LA)
Budd	Scott	Johnson (OH)
Burgess	Fulcher	Johnson (SD)
Calvert	Gaetz	Jordan
Cammack	Gallagher	Joyce (OH)
Carey	Garbarino	Joyce (PA)
Carl	Garcia (CA)	Keller
Carter (GA)	Gimenez	Kelly (MS)
Carter (TX)	Gohmert	Kim (CA)
Cawthorn	Gonzales, Tony	Kustoff
Chabot	Good (VA)	LaHood
Cline	Gooden (TX)	LaMalfa
Cloud	Gosar	Lamborn
Clyde	Granger	Latta
Cole	Graves (LA)	LaTurner

Lesko	Owens	Steel
Letlow	Palazzo	Stefanik
Long	Palmer	Steil
Loudermilk	Pence	Stewart
Lucas	Perry	Taylor
Luetkemeyer	Pfluger	Tenney
Malliotakis	Posey	Thompson (PA)
Mann	Reschenthaler	Tiffany
Massie	Rice (SC)	Timmons
Mast	Rodgers (WA)	Turner
McCarthy	Rogers (AL)	Valadao
McClain	Rogers (KY)	Van Drew
McClintock	Rose	Van Duyn
McHenry	Rosendale	Wagner
Meijer	Rouzer	Walberg
Meuser	Roy	Walorski
Miller (IL)	Rutherford	Waltz
Miller-Meeks	Scalise	Weber (TX)
Moolenaar	Schweikert	Webster (FL)
Mooney	Scott, Austin	Westen
Moore (AL)	Sessions	Westerman
Moore (Kuster)	Simpson	Williams (TX)
Mullin	Smith (MO)	Wilson (SC)
Murphy (NC)	Smith (NE)	Wittman
Nehls	Smith (NJ)	Womack
Newhouse	Smucker	Zeldin
Norman	Spartz	
Obernolte	Stauber	

ANSWERED “PRESENT”—2

Gibbs Kelly (PA)

NOT VOTING—6

Burchett McCaul Miller (WV)
Davis, Rodney McKinley Steube

□ 1143

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

MEMBERS RECORDED PURSUANT TO HOUSE
RESOLUTION 8, 117TH CONGRESS

Barragán (Beyer)	Gosar (Weber)	Rice (NY)
Bass	(TX))	(Deutch)
(Spanberger)	Houlahan	Ryan
Bergman	(Spanberger)	(Spanberger)
(Stauber)	Jeffries (Kelly)	Salazar (Moore)
Bowman	(IL))	(UT))
(Neguse)	Kahele (Correa)	Sires (Pallone)
Boyle, Brendan	Keating (Beyer)	Smucker (Keller)
F. (Beyer)	Kirkpatrick	Speier (Garcia)
Brownley	(Pallone)	(TX))
(Kuster)	Larson (CT)	Stevens (Kuster)
Bush (Kelly (IL))	(Himes)	Strickland
Carter (TX)	LaTurner (Mann)	(Kuster)
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(TX))	(Beyer)	Williams (GA)
Evans (Beyer)	Newman (Beyer)	(Neguse)
Foster	Palazzo	Wilson (SC)
(Spanberger)	(Fleischmann)	(Norman)
Gallego (Soto)	Pingree (Kuster)	
Gomez (Correa)	Porter (Neguse)	

MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Mr. Adrian Swann, one of his secretaries.

CONTINUATION OF THE NATIONAL
EMERGENCY WITH RESPECT TO
TRANSNATIONAL CRIMINAL OR-
GANIZATIONS—MESSAGE FROM
THE PRESIDENT OF THE UNITED
STATES (H. DOC. NO. 117-133)

The SPEAKER pro tempore laid before the House the following message